

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000004649

Entity Name: BOOMER INSURANCE SOLUTIONS LLC

Current Principal Place of Business:

843 SAN RAPHAEL ST
KISSIMMEE, FL 34759

Current Mailing Address:

843 SAN RAPHAEL ST
KISSIMMEE, FL 34759 US

FEI Number: 46-3617685

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUBITOSI, LINDA
843 SAN RAPHAEL ST
KISSIMMEE, FL 34759 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name GUBITOSI, LINDA
Address 843 SAN RAPHAEL ST
City-State-Zip: KISSIMMEE FL 34759

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA GUBITOSI

PRESIDENT

02/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date